Caution: DRAFT FORM

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released. You can check the scheduled release date on our web site (www.irs.gov).

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

Form **2106**

Employee Business Expenses

► See separate instructions.

Attach to Form 1040

OMB No. 1545-0139

2003

Attachment
Sequence No. 54

Department of the Treasury Internal Revenue Service (99) Your name

► Attach to Form 1040.

Occupation in which you incurred expenses

Social security number

		Column A	Column B		
Ste	o 1 Enter Your Expenses	Other Than Meals and Entertainment	Meals and Entertainment		
1	Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.)				
2	Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel or commuting to and from work	2			
3	Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3			
4	Business expenses not included on lines 1 through 3. Do not include meals and entertainment	4			
5	Meals and entertainment expenses (see instructions)	5			
6	Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6			
	Note: If you were not reimbursed for any expenses in Step 1, s	kip line 7 and enter the a	mount from line 6 on line a		
Ste	Enter Reimbursements Received From Your Employer Enter reimbursements received from your employer that were not reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see instructions)	er for Expenses Listed i	in Step 1		
Ste	Subtract line 7 from line 6. If zero or less, enter -0 However, if	40)			
o	line 7 is greater than line 6 in Column A, report the excess as income on Form 1040, line 7	8			
	Note: If both columns of line 8 are zero, you cannot deduct employee business expenses. Stop here and attach Form 2106 to your return.				
9	In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (.50). (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses by 65% (.65) instead of 50%. For details, see instructions.)	9			
10	Add the amounts on line 9 of both columns and enter the total her Schedule A (Form 1040) , line 20 . (Fee-basis state or local gov performing artists, and individuals with disabilities: See the instruwhere to enter the total.)	ernment officials, qualified			

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Par	t II Vehicle Expenses					
	tion A—General Information claiming vehicle expenses.)	(You r	nust complete this section if yo	ou	(a) Vehicle 1	(b) Vehicle 2
11	Enter the date the vehicle was p	lacod	n sorvico	11	1	/ /
12			g 2003		miles	miles
13					miles	miles
14	Percent of business use. Divide	ine 13	by line 12		%	%
15			ance		miles	miles
16	Commuting miles included on lin			16	miles	miles
17			subtract the total from line 12	. 17	miles	miles
18			vehicle available for personal use?			☐ Yes ☐ No
19	Was your vehicle available for person			/		☐ Yes ☐ No
20	Do you have evidence to suppor					☐ Yes ☐ No ☐ Yes ☐ No
21 Soc	If "Yes," is the evidence written?	to (S)	ee the instructions for Part II to	find ou	t whother to compl	
	tion C.)	ite (St	se the instructions for Part II to	illia ou	it whether to compl	ete tilis section of
22	Multiply line 13 by 36¢ (.36)	7.			22	
Sec	tion C—Actual Expenses		(a) Vehicle 1		(b) Vel	nicle 2
23	Gasoline, oil, repairs, vehicle	22				
	insurance, etc	23				
	Vehicle rentals	24a 24b				
b	Inclusion amount (see instructions) Subtract line 24b from line 24a	24c				
		210				
25	Value of employer-provided vehicle (applies only if 100% of					
	annual lease value was included					
	on Form W-2—see instructions)	25				
26	Add lines 23, 24c, and 25	26				
27	Multiply line 26 by the					
	percentage on line 14	27				
28	Depreciation. Enter amount					
	from line 38 below	28				
29	Add lines 27 and 28. Enter total here and on line 1	29				
			Use this section only if you ow	ned the	e vehicle and are co	mpleting Section C
101	trie veriicie.)		(a) Vehicle 1		(b) Vehicle 2	
30	Enter cost or other basis (see				(b) verifice 2	
30	Enter cost or other basis (see instructions)	30				
31	Enter section 179 deduction					
•	and special allowance (see					
	instructions)	31		,,,,,,,,,,,		
32	Multiply line 30 by line 14 (see					
	instructions if you claimed the					
	section 179 deduction or special	22				
	allowance)	32				
33	Enter depreciation method and	33				
34	percentage (see instructions) .	- 00				
34	Multiply line 32 by the percentage on line 33 (see instructions)	34				
35	Add lines 31 and 34	35				
36	Enter the limit from the table in					
	the line 36 instructions	36				
37	Multiply line 36 by the					
	percentage on line 14	37				
38	Enter the smaller of line 35 or					
	line 37. Also enter this amount	20				